

**BUREAU OF SECURITY AND INVESTIGATIVE SERVICES**

P.O. Box 989002
West Sacramento, CA 95798-9002
(916) 322-4000
www.dca.ca.gov/bsis

RENEWAL APPLICATION☐ **Security Guard or Patrolperson (\$35)**

Fee Enclosed \$

Delinquent Renewal (\$60) { expired for no more than 60 days }

☐ **Proprietary Private Security Officer (\$35)**

Expiration Date _____

Delinquent Renewal (\$60.00) { expired for no more than 60 days }

☐ **Alarm Agent (\$7)**

Registration # _____

Delinquent Renewal (\$32) { expired for no more than 60 days }

Social Security # _____

☐ **Locksmith (\$20)**

Delinquent Renewal (\$45) { expired for no more than 30 days }

(Please type or print legibly.)

| | | | | |
|--|-------------------|-------|--------|------------------------------|
| Name: | Last | First | Middle | Date of Birth |
| | | | | / / |
| Address: | Number and Street | City | State | Zip Code |
| | | | | Home Phone Number () |
| <input type="checkbox"/> Check here if this is a new residence address not already reported to the Bureau. | | | | |
| Employer Name: | | | | |
| Employer Address: | Number and Street | City | State | Zip Code |
| | | | | Employer Phone Number () |
| Do you possess a valid firearms qualification card? If yes, list your number | | | | |
| Signature: _____ Date: _____ | | | | |

INSTRUCTIONS FOR COMPLETING RENEWAL APPLICATION

Use the numbered instructions below to complete this renewal form.

1. Check the type of registration you are renewing.
2. Note the expiration date from your current registration card. It is recommended that you submit your renewal at least three months prior to the expiration but no sooner than six months. If your registration has expired, you must pay the applicable delinquency fee.
3. Print your entire registration number including the prefix.
4. Print your date of birth.
5. Print your name, address, city, state, ZIP code and telephone number (including area code). The telephone number will be used to call you in case of any problem with your renewal.
6. Print the name, address and telephone number of your current employer. If not currently employed as a security guard, alarm agent, or locksmith, indicate "unemployed."
7. If your address is new and has not been reported to the Bureau, indicate by checking the box.
8. If you have a valid firearms qualification card, print the card number (two-letter prefix and numbers).
9. Sign and date application.
10. Send application and fee to Bureau of Security and Investigative Services, P.O. Box 989002, West Sacramento, CA 95798.

ALL ITEMS MUST BE COMPLETE AND THE APPROPRIATE FEES ATTACHED OR THE APPLICATION MAY BE RETURNED